

TELEPHONE (312) 258-5500



SCHIFF HARDIN & WAITE

PATENT DEPARTMENT
6600 SEARS TOWER
233 SOUTH WACKER DRIVE
CHICAGO, ILLINOIS 60606
CONFIRMATION NO. 4964

In re application of: Baum et al.

SERIAL NO.: 09/394,840

GROUP ART UNIT: 3621

FILED: September 13, 1999

EXAMINER: Calvin L. Hewitt II

TITLE: "METHOD FOR DATA INPUT INTO A SERVICE DEVICE AND ARRANGEMENT FOR THE IMPLEMENTATION OF THE METHOD"

AMENDMENT "C" ACCOMPANYING FILING OF RCE MAIL STOP RCE

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450
SIR:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below.

| CLAIMS AS AMENDED | | | | | | |
|---|--|-------|--|-------------------------|---|--------------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | *20 | MINUS | 20 | X | () X 9.00 () X 18.00 | |
| INDEP. CLAIMS | *2 | MINUS | 3 | X | () X 40.00 () X 80.00 | |
| Application amended to contain any multiple dependent claims not previously paid for. | | | | () YES () NO | () \$135.00 () \$270.00 ONE TIME | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | \$0.00 |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated _____ for _____ months so that the period for response is extended to _____. A check in the amount of \$ _____ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ is attached.

☐ A check for \$ _____ accompanying IDS under 37 CFR 1.97(c) is attached

☐ A check for \$ _____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.

When phoning re this application, please call (312) 258-5500.

SCHIFF HARDIN & WAITE (Customer Number: 26574)

BY Steven H. Noll (28,982)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on July 11, 2005.

Steven H. Noll
NAME OF APPLICANT'S ATTORNEY
Steven H. Noll
SIGNATURE
July 11, 2005
DATE